

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 05/12/04  
Application Type:: Provisional  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: O-LINKED GLYCOSYLATION OF PEPTIDES  
Attorney Docket Number:: 40853-01-5109 PRO  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 46  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Shawn  
Middle Name::  
Family Name:: DeFrees  
Name Suffix::  
City of Residence:: North Wales  
State or Province of Residence:: PA  
Country of Residence:: US  
Street of Mailing Address:: 126 Filly Drive  
City of Mailing Address:: North Wales  
State or Province of mailing address:: PA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 19454

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: A.  
Family Name:: Zopf  
Name Suffix::  
City of Residence:: Wayne  
State or Province of Residence:: PA  
Country of Residence:: US  
Street of Mailing Address:: 560 Beechtree Lane  
City of Mailing Address:: Wayne  
State or Province of mailing address:: PA  
Country of mailing address:: US

Postal or Zip Code of mailing address:: 19087

**Correspondence Information**

Correspondence Customer Number:: 24341

**Representative Information**

Representative Customer Number:: 24341

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::